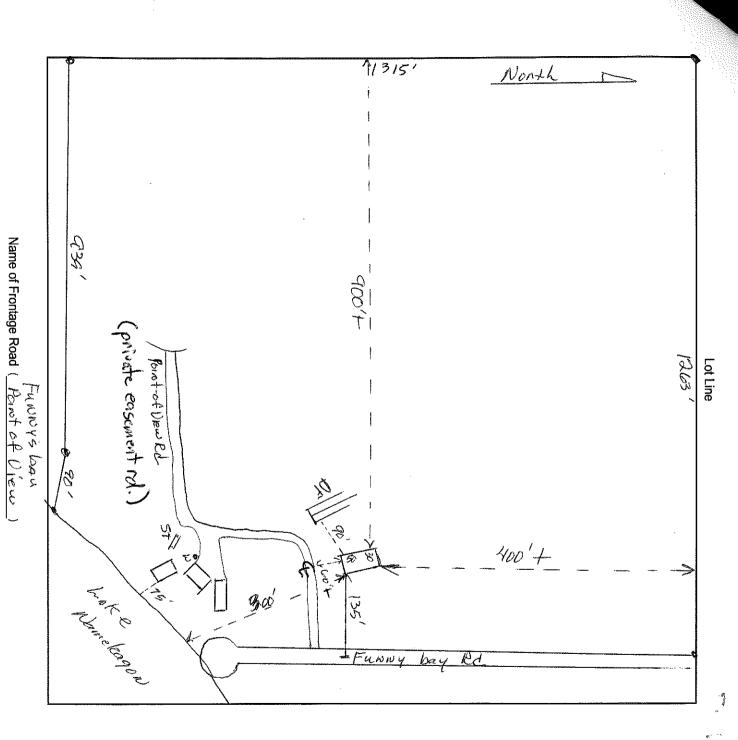
	S S S S S S S S S S S S S S S S S S S
SUBŘÍT COMPLETED ORIGINAL * APPLICATION, TAX STATEMENT AND FEE TO:	APPLICATION FOR PERMIT YFIELD COUNTY, WISCONSIN Application No.: 11-04/9
Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138	Date: 11/6
INSTRUCTIONS: No permits will be issued until all fees are paralyfield Co. Zoring Dept. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.	Amount Parg: 1410 Part Part Part Part Part Part Part Part
LAND USE X SANITARY PRIVY CONDITIONAL USE Use Tax Statement for Legal Description	VAL USE SPECIAL USE B.O.A. OTHER
Legal Description 1/4 of Section 35 Gov't Lot 1 less cs 4 #804 Block Subdivision	Township 44 North, Range OC West. Town of $90400000000000000000000000000000000000$
Volume 5 Page 258 of Deeds Parcel I.D. 24-	04-021-7-44-06-34-3 05-004-1000
Address of Property 46130 Aust of Wew Rd	Plumber VisBety Stumbing+1
Telephone 678 591-8842 (Home) 4/04-933-0942 (Work)	Authorized Agent ////////////////////////////////////
ls your structure in a Shoreland Zone? Yes X No ☐ If yes.	Less than 40 ☐
Structure: New X Addition Existing Fair Market Value 36,000 Square Footage 1,500	Numbe
☐ ※ Residence or Principal Structure(# of bedrooms)	Type of Septic/Sanitary System <u>CAV W/H++</u>
Residence sq. ft	☐ Commercial Principal Building
Residence sq. ftPorch sq. ft	Commercial Principal Bulloting Addition (explain)
Deck sq. ft Deck(2) sq. ft	☐ Commercial Accessory Building (explain)
☐ # Residence w/attached garage (# of bedrooms)	☐ Commercial Accessory Building Addition (explain)
Residence sq. ft Garage sq. ft	☐ Commercial Other (explain)
Residential Addition / Alteration (explain)	☐ Special/Conditional Use (explain)
0,0	☐ External Improvements to Principal Building (explain)
☐ Residential Other (explain)	☐ External Improvements to Accessory Building (explain)
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN	TRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

FAILURE TO OBTAIN A PERN

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to the above described property at any reasonable time for the purpose of inspection.

Attach a Copy of Recorded Deed)	APPLICANT — PLEASE COMPLETE REVERSE SIDE
(If you recently purchased the property	★ See Notice on Back
Copy of Tax Statement or	
ATTACH	Address to send permit 10636 Hayward C+ Hayward W. 51843
Date (c.t-1) 3011	Owner or Authorized Agent (Signature) / //CMPC UMAN
considered on the second of th	The second of th

Date of Approval	Inspector	LINZ C ADV
10-20-11	Signed Michael Turkel	pussine in structure.
e (B.O.A)#	Mitigation Plan Required: Yes \(\Delta\) No \(\Delta\) \(\Delta\) Variance (B.O.A. Condition: \(\Delta\) to be used for hussian hubitation: \(\Delta\) to the used for hussian hubitation:	Mitigation Plan Required: Yes 🗆 No 🔯
hrès per agent	Reason for Denial: Inspection Record: Well staked. Meeta all sethecles. Repety Unics Inspection Record: Well staked. Meeta all sethecles. Repety Unics Inspection Record: Well staked. Meeta all sethecles. Repety Unics	Reason for Denial: Inspection Record: Well staked. M. I GRESCH Tations. By
	State Sanitary Number	Permit Issued: State Date 11 2 11 Permit Numb



- -Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- N Show the location, size and dimensions of the structure
- ယ Show the location, size and dimensions of attached deck(s), porch(s) or garage.
- 4 Show the location of the well, holding tank, septic tank and drain field

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

- ÇT Show the location of any lake, river, stream or pond if applicable
- တ Show the location of other existing structures.
- Show the location of any wetlands or slopes over 20 percent
- ∞ Show dimensions in feet on the following:
- p a Building to all lot lines
- Building to centerline of road
- ဝဂ Building to lake, river, stream or pond
- Holding tank to closest lot line
- Holding tank to building
 - Holding tank to well
- Holding tank to lake, river, stream or pond
- Privy to closest lot line

- Privy to building
- Privy to lake, river, stream or pond
- Septic Tank and Drain field to closest lot line Septic Tank and Drain field to building
- ∄
- Septic Tank and Drain field to well Septic Tank, and Drain field to lake, river, stream or pond.
- 0 = Well to building

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits

will not make an inspection until location(s) are staked or marked Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector